NONSMOKING ORDINANCE GUIDE



Texas Department of Health,
Office of Smoking and Health and
American Lung Association of Texas

Source: https://www.industrydocuments.ucsf.edu/docs/hghm00088

The purpose of this booklet is to guide communities in the development of local ordinances designed to limit smoking in public places. The booklet provides suggested methods for accomplishing the community's objective, from organizing a Steering Communities to conducting a media campaign. Community organizers who contributed information for this guide have worked in both rural and urban areas to successfully establish nonsmoking ordinances. This booklet is intended to serve only as a guide, with information and suggestions that can be tailored to reflect the attitudes and desires of your particular community.

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The Texas Office of Smoking and Health is funded by the Texas Cancer Council

TABLE OF CONTENTS

	<u>.</u>	Pg. No.
I.	Getting Organized	5
	A. Keys to Successful Organization B. Sample First Meeting Agenda	
IL.	Working with a City Council	11
	A. Tips for a Successful Working Relationship B. Sample Correspondence	
ш	Working with the Media	15
	A. Arranging a Meeting with a Newspaper Editor or News Director B. Sample Correspondence C. Sample Article/News Release D. Ordinance Highlights	20 21
IV.	Building Community Support.	25
	A. Suggestions for Organizing Volunteers B. Possible Projects for Volunteers C. Sample Correspondence	28
v.	Preparing to Speak at the City Council Meeting	31
	A. Sample Testimonies	33
VĽ	Implementation of the Ordinance	41
AIT	Sample Ordinance	47
VIII.	List of Established Ordinances	55
DC.	Facts Concerning Smoking	59
	A. Arguments Against the Ordinance and Responses B. Texas Statistics C. Facts on Cigarette Smoking	62
X.	Additional Resources	66

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SECTION I. GETTING ORGANIZED

In many communities one person may initiate efforts to establish an ordinance. That person may be a member of the medical profession, a representative of a service organization, or a concerned citizen who has been adversely affected by smoking. In any case, success will depend on the combined efforts of a diverse group of individuals. This section contains suggestions for organizing a Steering Committee to lead community efforts, and a sample first meeting agenda. We suggest that you familiarize yourself with the contents of this booklet before beginning any Committee activities,

Keys To Successful Organization

- Establish a Steering Committee composed of key individuals and organizations representing many areas
 of support such as health service representatives, nonsmoking advocates, medical professionals, voluntary
 health agencies (i.e., American Heart Association, American Cancer Society, American Lung Association), local state and county health officers, local business persons, politicians, attorneys, Chamber
 of Commerce and P.T.A. representatives, public relations experts, and educators.
- Select a respected member of the group to serve as coordinator. This person will a) serve as spokesperson
 for the Committee, b) establish meeting agendas, c) conduct meetings, d) see that accurate records are kept
 of the Committee's activities. (These duties may be delegated to other members of the Committee if the
 coordinator has limited time.)
- Establish a clear objective for the community. Determine the specific result the Committee is seeking.
 Example: To protect the public health, comfort and environment by limiting smoking to designated areas only in public places, at public meetings and at worksites.
- 4. Poll the City Council to determine support for the ordinance. This can be done either in person or by letter. State the Committee's objective clearly and ask for a response. If at this point the Committee determines that the City Council is in complete agreement, the ordinance can be drafted, approved, and implemented. (See Section VI: Implementation.) This step will also identify those persons who will oppose the ordinance and may need additional justification.
- 5. Contact a Council member or the City Secretary to determine protocol for introducing the ordinance. Steps 4 and 5 may be done in either order you choose.
- 6. Prepare a budget for necessary expenditures (copying, postage, phone, office supplies) and pinpoint sources of revenues through fundraising, donations or dues.
- 7. Assign specific tasks for each Committee member aimed at achieving the Committee's objective. See that each member has a function within the Committee and understands that function. Allow adequate time at each meeting for members to report on their progress.
- 8. Know the facts about smoking: prevalence, dangers to both smokers and nonsmokers, health costs in lives and dollars, and legal issues. (See Section IX: "Facts" in this booklet or contact one of the resources listed in Section X.) Anticipate arguments from the opposition, (See Section IX) and prepare Committee's response to those arguments.
- 9. Build local support as you progress. Identify credible spokespersons, especially those who will testify before the Council. (See Section V.) Prepare an article for your local newspapers including a phone number and/or address to contact for more information. Response to this article will be valuable in identifying both supporters and opponents. (For more detailed assistance see Section III.) Contact the supporters you have identified and solicit their help in building community support. (See Section IV.)
- 10. Become familiar with the operations of your City Council. Members of the Steering Committee should amend City Council meetings prior to the introduction of the ordinance. This is valuable in learning how the meetings are conducted and what to expect. (See Section II.)

The following is a sample agenda for the first Committee meeting. With so much to cover, the newly elected Coordinator should strive to keep the meeting focused on the agenda items. Conversation may drift to issues such as other indoor pollutants or statewide ordinances. The group's attention should be refocused to specific items related to smoking in your community. Do, however, allow time for individual contributions related to the local issues.

Sample First Meeting Agenda

- I. Selection of a Steering Committee coordinator/spokesperson
- II. Discussion of Issues and Facts
 - A. Reasons for an ordinance
 - 1. Hazards of passive smoking
 - 2. Lack of adequate current regulations
 - 3. Prevalence (nonsmokers outnumber smokers)
 - 4. Economic costs of smoking
 - B. Anticipated arguments against an ordinance
 - 1. Invasion of rights
 - 2. Impossible to enforce
 - 3. Hurts business
 - 4. Expensive to comply
 - 5. Dangers of passive smoking aren't conclusive

Refer to Section IX for counters to these arguments.

III. Development of an Ordinance

- A. Determine what the Committee wants to accomplish. Sample ordinance (Section VII) may be used as a starting point.
- B. Edit the sample ordinance as necessary so that the Committee's objective is met.
- C. Determine how the ordinance will be enforced (See Section VI).
- Assignment of Committee tasks to be completed before next meeting.
 - A. Develop a list of names and addresses of those persons who might support the ordinance.
 - B. Develop fact sheets on what the ordinance will do and why it is important.
 - C. Ask an attorney to review the ordinance for loopholes.
 - Assign a subcommittee to contact local media, and develop articles/programs for newspapers, radio and TV stations.
 - E. Ask any Council members known to support an ordinance to review the draft, and provide feedback.
- V. Set next meeting date.

Agendas for subsequent meetings might include:

- 1) Reporting on tasks assigned at previous meetings.
- 2) Identifying stumbling blocks to establishing an ordinance, and developing strategies for overcoming them.

For example, who opposes the ordinance? To what degree do they oppose it? Some opposition may be limited to only certain sections of the ordinance. Opponents may be opposed to any nonsmoking ordinance, and therefore might not be worth the time and energy necessary to convince them. How can the opposition be persuaded to support the ordinance? Who among Committee members or volunteers has the expertise to handle the opposition?

Establishing clearly the issues related to the ordinance, and who speaks for the coalition.

In some communities there have been problems in this area. It is important that everyone speaking for the Committee identify themselves as such, and that all spokespersons understand the issues related to the ordinance. With detailed fact sheets and clear understanding of the goal of the coalition, any member should be able to speak for the group.

4) Making decisions on best use of time and energy.

Keep in mind that time is limited for most people. Staying in close contact with Council members may be more of a priority than getting articles run in local newspapers.

- 5) Devoting time to encourage, praise, thank members for hard work.
- 6) Allowing time for socializing among members to relieve the pressure of difficult work and to increase goodwill.

SECTION II. WORKING WITH A CITY COUNCIL

The working relationship between the Steering Committee and City Council will influence not only the ease with which an ordinance is established, but will also affect the implementation. Included here are suggestions and sample correspondence for establishing and maintaining a good relationship with the City Council.

Tips For A Successful Working Relationship

- Make a personal visit, if possible, to each Council member. Arrange an appointment with either the Council members, or in large cities, the Council member's aide. State the nature of the issue you are concerned about when you call for an appointment.
- 2. If you cannot make a personal visit, write a letter. Discuss only the issue of a local ordinance, and limit the letter to one page.
- 3. Whether you plan a personal visit or a letter, you should provide your elected officials with a very brief summary of the issue at hand. This summary should be attached to your letter, or included in the agenda during your visit. Leave a copy with them for future reference.
- 4. If planning a personal visit, familiarize yourself with the facts and outline what you want to say. Always be courteous, appreciative, and express your gratitude. Based on the councilperson's reaction to your proposal, decide whether further work needs to be done to gain his/her support.
- Attend several City Council meetings before introducing your proposed ordinance so that you will be familiar with Council procedures.
- 6. Establish and maintain contact with the Council Secretary. He/She can answer questions and explain procedures for presenting an ordinance for vote.
- 7. Continue educating Council meinbers prior to the ordinance hearings through phone and letter writing campaigns. Include compelling health and economic reasons for the ordinance, and counter arguments to statements made by the opposition (See Section DX). Fact sheets that can be read quickly are preferable to detailed reports.
- 8. Focus on council members who are undecided or only slightly opposed. Don't waste time on those who are adamantly opposed to the ordinance.
- 9. Submit a draft of the proposed ordinance to the city attorney for his/her review.



City Councilperson Texas
A community-wide committee is in the process of proposing a clean indox air ordinance for the City of
Our committee has been actively meeting on a weekly basis since Our plans include an extensive media blizz, letters of support from community organizations (principally health related), and testimonies at the public hearing.
The proposed ordinance was submitted for review to the city attorney in We also plan to furnish you with a full information packet and supporting literature in addition to a copy of the proposed ordinance prior to the first reading.
We would appreciate your consideration of this proposed ordinance. We have enclosed a fact sheet which gives some background information on some of the reasons behind our efforts.
Sincarely,
Local American Lung Association
Local American Cancer Society
Local American Heart Association

SECTION III. WORKING WITH THE MEDIA

An organized media campaign serves two primary functions: 1) assists the Steerin

or relevision spaton. It is advisable for the Steering Cor Working with the media ca

Possible Media Projects

- Invite an editor or news director to lunch. Request space or air time for articles or programs related to smoking.
- 2. Provide the media with profiles of local experts speaking on various aspects of smoking (i.e., dangers, cost, prevalence. See Section IX).
- 3. Write human interest articles on the effects of passive smoke on an asthmatic child, recovering cancer patient, ex-smoker, or any other member of the public.
- 4. Offer to have medical experts appear on local TV or radio talk shows.
- Small newspapers always need stories and local talk shows need participants. Supply your local media with names of Committee members who have been appointed as spokespersons for the Committee. If the media needs a filler they will know who to contact.

Remember ---

- * Always emphasize the health issue,
- * Spokespersons should be appointed by the Steering Committee to serve as representatives for the opinions of the Committee, not personal interests.
- * Keep the tone helpful and casual, not aggressive.
- Always send thank you notes.

Arranging A Meeting With A Newspaper Editor Or News Director

- Call the Editor to make an appointment, (In a larger city, it might be preferable to send a letter first, then
 make a follow-up telephone call.)
- During the telephone call, introduce yourself. Explain that your Committee wants to talk with (name of newspaper)'s editorial board about important public health legislation, a City Nonsmoking Ordinance.
- 3. Assure the editor that you'll only need 30 minutes for the meeting.

Planning The Meeting:

- 1. It is preferable to have three volunteers make this presentation to the editor and the editorial board.
- 2. Leave a packet of materials with the editor. This packet should include a copy of the proposed ordinance fact sheet, the Texas Poll results and prevalence statistics. These will assist the editor in writing an editorial if he/she chooses and will also provide reference materials for their files. Make sure you have a copy of the "letter-to-the-editor" in case the editor isn't willing to write an editorial. (Sample included in this Section)

The letter to the editor should state the individual's support for the Clean Indoor Air Ordinance and request the support of other citizens and the support of the City Council and County Commissioners' Court.

The letter should also include some documentation or facts. (See fact sheet.)

Below are tips for writing a letter to the editor:

- a. Focus. Write about one topic. Resist the urge to mention several issues. The letter will lose its impact.
- b. Write calmly and factually.
- c. Have ideas, suggestions clearly defined.
- d. Make sure facts are correct and correctly attributed.
- e. Write to the length of other letters the newspaper prints. If editors have to shorten the letter, they may not bother to run it at all or may miss key points.
- f. Include full name and address. Editors do not print anonymous letters.
- 3. Leave telephone numbers and names of people for the editor to follow up with for additional information or for updates on the ordinance.
- 4. Prepare an agenda to ensure that the meeting runs smoothly and on time. Localize the agenda for the meeting. Decide ahead of time who will cover each item. Allow plenty of time for questions and answers.



Sample Agenda

- I. Introductions
- II. Purpose

Explain purpose of meeting:

"To share with you the importance of the local nonsmoking ordinance and how important passage is to the health of (name of city)'s citizens.

- III. Reasons To Support A Local Nonsmoking Ordinance
 - A. Summarize facts associated with smoking, using background information on Fact Sheet.
 - B. Outline Texans' feelings about smoking restrictions, using Texas Poll results. [See next page.]
- IV. Summarize The Nonsmoking Ordinance

Highlight the points in the ordinance, using the ordinance highlights on the Fact Sheet.

- V. Questions And Answers
- VI. Adjournment

Wrap up and thank yous. Be sure to leave within 30 minutes, as you promised.

VIL Follow Up

Send a thank you letter after the meeting. Remind the editor that you will keep him/her informed on the progress of the ordinance.

Sample Letter-To-The-Editor

Date

Editor Newspaper City, State Zip

Dear Editor:

The American Cancer Society, American Heart Association and American Lung Association, in cooperation with other local groups, are advocating passage of a local nonsmoking ordinance to protect nonsmokers.

Enactment of a local nonsmoking ordinance would prohibit smoking in public places and public meetings, except in designated areas. Passage of this act would be an effective way to reduce smoking and protect citizens from health problems related to involuntary smoke.

According to a November 1986 poll commissioned by the Texas American Heart Association, 77 percent of Texans favor state legislation prohibiting smoking in public places and 67 percent of Texans favor legislation requiring policies affecting the workplace. In December, 1986, C. Everett Koop, M.D., Surgeon General of the United States issued a definitive statement on the hazards of second-hand smoke. Dr. Koop said, "We believe there is all the medical evidence necessary to support reasonable and sensible protection for the nonsmoker against the irritation and potential harm that comes from other peoples' smoke. You must agree that cigarette smoking is a major health risk to both the smoker and nonsmoker.

As volunteers for the American Cancer Society, American Heart Association and the American Lung Association, we urge you to contact your City Council and ask them to support this important health issue.

Succeety,			
· >	•		
(Your Nar	ne)	(Your Name)	
ACS Volum		AHA Volunteer	
	(You	or Name) Volunteer	

The following is a suggested "first article" to introduce the community to the issue,

SMOKING AND HEALTH

Smoking is losing its appeal, according to a 1986 survey by the Centers for Disease Control (CDC) in Atlanta, Ga. The overall national eigarette smoking rate fell to its lowest level, with 26.5 percent of adults older than 17 reporting that they smoked. This is more than a four percent drop from 1985, when 30.4 percent of the adults surveyed said they smoked.

"Public awareness of the health hazards from smoking and the decreasing social acceptance of tobacco have helped reduce the number of smokers," said Ron Todd, coordinator of the Office on Smoking and Health at the Texas Department of Health.

Dr. Ronald Davis of the CDC predicts smoking rates will continue to drop until only the "hard-core" smokers remain, about 10 to 15 percent of the population.

In the 1986 CDC study, which involved more than 13,000 adults nationwide, 29.5 percent of the men and 23.8 percent of the women surveyed said they smoked. A national health survey in 1985 showed that 33.2 percent of men and 27.9 percent of women were smokers.

The 1986 survey indicates more black men than white men tend to smoke (32.5 vs. 29.3 percent). Black women use tobacco more than white women (25.1 vs. 23.7 percent).

For men, the smoking habit is most prevalent between the ages of 35-44, when 37.1 percent of males smoke. Women's highest usage rate, 29.2 percent, occurs in the 25 to 34-year-old age group. On the average, men smoke 22.8 cigarettes per day, while women smoke 19.1 cigarettes.

"People are realizing the need to stop smoking," Todd said. "In the past two years, over 29 Texas cities have adopted ordinances restricting smoking in public places. In the last year, 100 worksites have requested our assistance in developing workplace nonsmoking policies. Smoking is no longer the social norm."

For information of smoking and other tobacco use, call the Texas Office on Smoking and Health toll-free at 1-800-345-8647.

Sample News Release

SECOND-HAND SMOKE ALERT

A new phenomenon is emerging. Nonsmoking is becoming the norm at work and throughout American society.

Seventy-four percent of the civilian population over 20 years of age are nonsmokers. This heretofore "silent majority" are becoming more vocal in their objections to exposure to the smoke from cigarettes.

In December 1986, C. Everett Koop, M.D., Surgeon General of the United States issued a definitive statement on the hazards of second-hand smoke. Dr. Koop said, "We believe there is all the medical evidence necessary to support reasonable and sensible protection for the nonsmoker against the irritation and potential harm that comes from other people's smoke. We base this conclusion on the following:

We know that the harmful constituents of mainstream cigarette smoke are found in sidestream smoke, sometimes to a greater extent than in mainstream smoke.

We know that pollution from tobacco smoke in homes, offices, other worksites and in certain public places can reach levels which exceed contaminant levels permitted under environmental and occupational health regulations.

We know that nonsmokers absorb the constituents of tobacco smoke into their bodies, even though in smaller amounts than is true of those who smoke.

We know that passive smoking can make the symptoms of asthma and chronic bronchitis worse, and make life miserable for people with allergic conditions.

We know that maternal smoking has a harmful effect on pregnancy, including an increased risk of miscarriage, stillbirth, death soon after birth, low birth weight and fetal death,

And finally, there is increasing evidence to suggest that environmental tobacco smoke can bring about disease, including lung cancer, in healthy nonsmokers, including infants and children.

It is on the basis of these facts that I advise nonsmokers to avoid exposure to eigarette smoke wherever possible, and that in particular they should protect infants and young children from this smoke."

Dr. Koop's warning has been heeded by more than 30 of Texas' more progressive communities and county govemments. Local ordinances have been enacted which restrict smoking in public places. The November 1986 Texas Poll revealed that 77 percent of all Texans favor state legislation prohibiting smoking in public places. In addition 67 percent favor legislation requiring policies affecting the workplace.

Sample Ordinance Fact Sheet

The following is taken from a proposed state ordinance. You will want to write your own fact sheet about your community's proposed ordinance, for distribution to the media, City Council and interested citizens.

Bill Highlights:

- The purpose is to protect the public health, comfort, and environment by prohibiting smoking in public places and at public meetings except in designated smoking areas.
- Signs prohibiting smoking must be posted at all building entrances except in designated smoking areas.
- Proprietors of public places must make a reasonable effort to prevent smoking by:
 - Designating smoking areas:
 - - Posting signs properly;
 - Requesting that smokers refrain from smoking in nondesignated areas.
- In the workplace, a written smoking policy must be implemented accommodating smoking and nonsmoking employees within 90 days after the effective date.
- * In restaurants with 25 seats or more, customer preference must be considered in determining the size of a designated smoking area.
- * Smoking at a public meeting or in a public place that is not a designated smoking area is a violation and punishable by a fine of \$100.
- Bars, restaurants with 25 seats or less, or retail stores that primarily sell tobacco may be designated as a smoking area in their entirety.
- Local governments may adopt more stringent ordinances regulating smoking in public places and in public meetings.
- Effective January 1, 1988.

Local ordinances are passed because the majority of the people in a community want to see smoking restricted in public places, in many communities an ordinance can be implemented by the actions of a few people that represent the majority of the public. This can certainly happen when a majority of the City Council supports the ordinance from the beginning. However, other communities may need a highly organized and lengthy campaign, with support built gradually through the media and personal contact.

support the ordinance but do not have the time to serve on the Steering Committee. Suggestions for organizing additional commitmity support are included here, as well as a list of possible projects. The Storcing Committee may need to solicit additional help from persons in the community who actively

Suggestions For Organizing Volunteers

- 1. The Steering Committee should first determine who is needed for the tasks. What expertise is lacking among Committee members? What special skills are needed? Who can add credibility to the issue? Based on the presumed reaction of the community to the ordinance, who could best address objections, fears, misconceptions?
- 2. Specific projects for these volunteers should be planned carefully. What will they be doing? What are their objectives? Are there time requirements for projects? What materials/resources will they need?
- 3. The Steering Committee should appoint one of its members to provide leadership for the volunteers. If problems or questions arise, the volunteer coordinator would serve as contact person, and would also report to the Steering Committee on the progress of projects.
- 4. Volunteers should be required to attend an orientation meeting. A suggested agenda would be:
 - a. Introduction of Steering Committee and its objective (draft of ordinance, if possible)
 - b. A review of the issues
 - c. Suggested Projects (allowing for input/suggestions from volunteers)
 - d. Suggested Time Table (again, allowing for input from volunteers)

The Steering Committee and Volunteer Coordinator should make certain that each person understands his/ her job before leaving the orientation. Materials and resource packets should be put into their hands. They should be sent out the door enthusiastic and eager to begin. If possible, set another meeting date when they can share success stories and achievements.

5. Express the Committee's gratitude to the volunteers.

Possible Projects for Volunteers

- Personal contact with Council members who oppose the ordinance (or who have reservations about it) can
 be helpful. A community volunteer might arrange a meeting with a Council member, to discuss the
 necessity for and provisions of the ordinance. This can be especially helpful if the volunteer has had a prior
 business or personal association with the Council member.
- A community volunteer having some contact with a local newspaper can arrange for articles to be run
 introducing the ordinance, addressing objections or soliciting support. This contact person could arrange
 a meeting between the editor and Steering Committee members.
- Community volunteers are often needed to fill City Council meetings as a way of demonstrating support for the ordinance. These persons may be asked to testify at Council meetings or simply wear buttons indicating their opinion.
- 4. Community volunteers can also assist with various office work tasks, such as:
 - a. letter writing and phoning
 - b. making signs and buttons
 - c. updating mailing lists
 - d. making copies
 - e. obtaining office supplies

When someone asks "What can I do?" always have an answer!

Sample Letter To Volunteers And Supporters

Date			
Name Address City, Texas Zip Code			
Dear (Name):			
The American Heart Association, the American Lung Association and the American Cancer Society in Texas have been actively involved in promoting a statewide clean indoor air law and similar local ordinances. Clean indoor air ordinances would, with a few exceptions, prohibit smoking in public places. We see passage of these initiatives as an effective way to reduce smoking as well as protect the public from the problems related to second-hand smoke.			
(Name of city) City Council is considering a Clean Indoor Air Ordinance. We need your support in asking volunteers to join together in an effort to pass local ordinances similar to those already passed in Dallas, Kerrville, Fort Worth, Tyler, Bryan, Austin and other cities.			
A meeting on this issue will be held on (date, day) at (time) at (location). Volunteers will be needed to attend the Council meetings as a show of support, testify in favor of the ordinance, write letters-to-the-editor, and write, telephone or visit a City Council member. If you can help with any of these activities, please call (name of contact) at (phone number).			
Thank you for your support and assistance.			
Sincerely,			
(Name) Volunteer	(Name)		
American Heart Association	Volunteer American Lung Association		

American Cancer Society

(Name) Volunteer

SECTION PREPARIN

dentials are important, but the ability to speak well to a large audience is more important. These persons may The Steering Committee should carefully select individuals to present testimony to the City Council. Crethe text should be approved by the Committee. It might be helpful to provide Committee meeting time for deliver speeches based on the samples included here, or they may choose to write their own. In the latter case, presentation of the speeches as "practice" before the main event

Suggestions of individuals to present testimony include

- restaurant owners
 - medical doctors
- American Lang Association, American Heart Association and American Cancer Society representatives
 - retail business owner/manager
 - s, including school na 4.6
- city, county, state health officials
- elative of a deceased smoker parent of an aethmatic child **~ ~ 당 디**디
- religious leaders

in injury management, countries
My name is [].
I am an attorney who is here to urge the Council to adopt the non-smoking ordinance.

Passage of the ordinance will assist employers in avoiding liability for failing to provide employees a safe workplace.

Texas employees have a legal right to a safe workplace. Courts in many states are now taking judicial notice of the toxics in cigarette smoke and the association of breathing those toxics with such disabilities as asthma, emphysema, lung cancer, heart disease, and bronchitis. The courts are holding that employers must provide a smoke-free workplace for employees who have special sensitivities to cigarette smoke.

This Council can help employers take preventative actions now that will eliminate future disability and workers compensation payments. You can help [city] employers limit future liability for failing to provide a safe workplace by adopting the non-smoking ordinance.

Thank you.

Mirvor Members of the City Council:

Mayor, members of the City Council.

Thank you very much!

My name is []
I am a member of the [name of organization] and attended the last City Council meeting in which the proposed ordinance limiting smoking in public places was unanimously passed on the first reading.
In the intervening weeks, much has been said and written both pro and con about the ordinance.
About the only negative comments come from two sectors: The first category includes those who support the ordinance but are concerned over having to enforce it in their businesses. The answer to their concerns seems to lie in time since cities with similar ordinances report voluntary compliance, making enforcement an issue of relatively little concern. Also, as progressive a city as { city name} is, surely businesses and the city can come up with workable ways to enforce the ordinance in those relatively few cases when it needs to be.
The second category of critics of the ordinance fall into the few uninformed or misinformed who feel that the ordinance seeks to keep smokers from smoking. Although a potentially fortuitous side stream benefit (so to speak), this is NOT the intent of the ordinance. The intent of the ordinance is ONLY to keep smokers from smoking in places where non-smokers have to breathe.
To those critics in this second category who seem to take offense at what is seen as the latest attempt of "do-gooders" to usurp their rights. I would like to quote the man who, in his "Letter to the Editor", quoted ABC Commentator Paul Harvey's saying that "your rights stop where my nose begins". This quote is particularly apt in this situation; although to those I would add eyes, lungs, and heart.
I urge you to pass the ordinance and to support its enforcement. And its citizens will be the better for it. It is an exemplary way to start the New Year!

Mayor.	Members	of the	City	Counc	il:
	•				
My nan	ne is []	

As Chairperson of [name of group], I would like to thank you for holding this timely public hearing. The regulation of smoking in public places and the workplace is based upon the fundamental responsibility and power of government to protect the health and safety of its citizens. The adverse effects of secondhand tobacco smoke are of such consequence that action is required.

I firmly believe that in [city], Texas, local values can prevail against the commercial pressures from outsiders like the Tobacco Institute and its local allies and agents. Do not be lulled by the tobacco industry's theme song of costs, enforcement, and government intrusion. Keep your focus on the real issue of health, and let the experience of other communities as well as the experience of Minnesota be your guide on the red herring issues raised by the opponents of this ordinance—opponents that apparently place economic self-interest above public health.

We stand ready to answer any questions or work with City Staff or any legitimate local business regarding questions of interpretation, need for constructive revision, or policy concerns in implementation of this moderate and balanced ordinance.

Thank you.

Mayor,	Members of	the City	Соп	neil!	
My nan	se is [_], and∃l	live i	in (city)	•

I support the proposed ordinance because it would begin to change the current, absurd system which requires that nonsmokers must search for a safe place to breathe. Instead, a smoker would be required to take responsibility for the toxic by-products of his or her habit by seeking an appropriate place to smoke.

The tobacco industry continues to deny any link between passive smoking and health. As the mother of a four-year-old child with asthma, I personally know the effects of passive smoking. I do not have to be a researcher or a doctor to know that tobacco smoke triggers my daughter's asthma attacks. She, like all of us, is bombarded by secondhand smoke in stores, public restrooms, grocery stores, restaurants, and even in the cashier's line at the pharmacy where we purchase her antiasthmatic prescription drugs.

Her asthma attacks are immediate and severe. She is just one of the over 6 million asthmatics in the United States. And asthma is just one of the bronchial disorders adversely impacted by smoke.

I would like to quote Dr. C. Everett Koop, M.D., Surgeon General:

- "There is all the medical evidence necessary to support reasonable and sensible protection for the nonsmokers against the irritation and potential harm that comes from other people's smoke.
- *The harmful constituents of mainstream cigarette smoke are found in sidestream smoke, sometimes to a greater extent than in mainstream smoke.
- *Passive smoking can make the symptoms of asthma and chronic bronchitis worse, and make life miserable for people with allergic conditions.
- *There is increasing evidence to suggest that environmental tobacco smoke can bring about disease, including lung cancer, in healthy adults, children and infants.

Experience, in places such as Minnesota, San Francisco, and San Diego, shows that regulations such as this proposal are workable and popular, even among smokers. Based on the ever-mounting evidence confirming that ambient smoke is indeed a health hazard, not simply an annoyance, the only responsible course of action is your vote for a strong and effective ordinance to restrict public smoking in [name of city].

Who else can protect my children and the other children of [name of city] from the American cigarette companies and the S2.7 billion they spend each year advertising their dubious products?

Thank you.

Mayor, Members of the City	Council
My name is [].	

A new study by the Federal Office of Technology Assessment indicates that the cost of smoking to the American public can well top 100 billion dollars a year. This includes 12 to 35 billion dollars each year to treat smoking-related diseases. Such diseases result in productivity losses to the economy of 27 to 61 billion dollars. Smoking increases costs paid by the federal government to the Medicare Program by 1.7 to 5.4 billion dollars per year.

Smoking's negative effects on health and safety produce financial losses, too. Society as a whole — and employers in particular — suffer the economic impact. Smoking increases:

- Health care costs
- * Absenteeism
- Disability retirements
- Accidents
- Losses due to fire
- Property damage
- Insurance costs
- Lost productivity

Employers are learning the effects of smoking in their companies.

- The chairman of General Motors estimates that smoking-related costs add \$500 to the price tag for each auto produced.
- Studies of hotels which offer smoke-free rooms show that nonsmoking rooms rent 30% faster than smoking-permitted rooms and the costs for maintenance are 50% lower in nonsmoking rooms.
- Economists calculate the average smoking worker costs his or her employer 1,000 to 4,000 dollars every
 year compared to a nonsmoking worker.

This ordinance will help (city) employers, including the city, to lower the costs we all directly or indirectly pay.

Thank you.

Mayor, Members of City C	ouncil:
My name is [1.

Cities and states that have enacted comprehensive smoking restrictions have experienced virtually no problems in compliance and enforcement, and have found that such restrictions are overwhelmingly popular.

According to an August 15, 1984, Wall Street Journal article, the San Francisco ordinance that restricted smoking in the workplace-and whose language is virtually identical to the Austin language—is working well. Bruce Tsutsui (pronounced SUTT-SWE), the inspector who handles complaints in San Francisco, said, "We had hoped it would be self-enforcing, and it's been going that way."

A study after 12 months showed only 124 complaints, all resolved without fines or litigation. No additional employees were hired to enforce the ordinance, and no special funds were needed.

Mayor, Members of the City Council:
My name is [].
I want to share with you why restaurants benefit from the proposed ordinance

The April 1983 Gallup Poll on "Attitudes toward Smoking" shows that 86% of smokers agree that nonsmokers and smokers should be provided with separate sections, or smoking bans. In the July 1984 Texas Poll by Texas A&M University, a majority of respondents said they support mandatory separation of smokers in restaurants and the workplace. An even more recent Gallup Poll dealing with "Eating Out" reports the third most common response to the question "Why don't you eat out more often?" was that those answering did not eat out more because they were bothered by ambient smoke.

Restaurant owners can do little to compete with home-cooked food and home atmosphere—the two most common reasons for not eating out more—but they can easily provide nonsmokers with clean air.

When assured of clean air by this ordinance, the public, I believe, will eat out more frequently. In addition, restaurateurs will clearly benefit from significantly lower maintenance and operating costs, as well as an increase in the number of seatings achieved during peak periods.

Thank you.

health of its citizens. Now you must work to see that implementation of the ordinance is as smooth and troublefree as possible. Your goals should be: 1) public education limited enforcement

You have worked to establish an important regulation for your community, one that will directly benefit the

- 2)
- assisting with compliance

Public education involves getting the specific details of the ordinance to the public. In Texas cities where this was done successfully, enforcement citations were rarely necessary. Enclosed is a reprint of an information card distributed in Austin. You may want to develop something similar in your community. The media contacts you established early in your campaign may be willing to assist in public education. Ask community supporters to assist with distributing information on compliance to local businesses.

If possible, request that your City Council appoint a local health official to supervise compliance and enforcement. This person would be responsible for investigating complaints. In most communities, violation of the ordinances is a misdemeanor, which would involve the police in issuing citations. Since it is preferable to stress the health issue of compliance rather than the legal, the less involvement by law enforcement agencies the better.

It might be helpful to design a complaint form that can be completed by any citizen and delivered to the health official or city officer responsible for handling complaints. These forms should be made available throughout your community initially, perhaps at check-out counters and cashier areas, public libraries and doctors' offices.

As several communities with established ordinances have discovered, you may need to return to the City. Council for the purpose of tightening loopholes that may have been discovered in the ordinance. Again, the better your working relationship has been with the Council and the enforcement agency, the easier this task will

On the sixth month or one-year anniversary of your ordinance, ask your media contact to report on the good news - how well the community has responded and complied with the ordinance.

TO ALL AUSTIN EMPLOYERS, BUSINESS OWNERS AND MANAGERS:

The Austin City Council has passed a Clean Indoor Air Ordinance to protect the public health from damage due to second-hand tobacco smoke.

While we trust that you will abide by the law, please be advised that any citizen may choose to mitiate prosecution for any observed violation of the ordinance.

ANY VIOLATION OF THE CLEAN INDXOR AIR ORDINANCE MAY LEAD TO A FINE OF \$1000 PER OFFENSE. EACH DAY A VIOLATION CONTINUES IS A SEPARATE OFFENSE.

SUMMARY OF AUSTIN CLEAN INDOOR AIR ORDINANCE (Ord. #860116-I)

The ordinance specifies that PUBLIC PLACES IN AUSTIN ARE NONSMOKING AREAS: if certain criteria are met, smoking areas may be set aside within these public places. "PUBLIC PLACES" include any indoor area used by the general public, any indoor place of employment, any fenced area of city swimming pools, and taxicabs.

NOTHING IN THE ORDINANCE REQUIRES ANY PUBLIC PLACE TO PERMIT SMOKING. THE ORDINANCE ENCOURAGES SMOKE-FREE ESTABLISHMENTS AS A MEANS OF COMPLIANCE.

SMOKING AREAS

ALTHOUGH NO PUBLIC PLACE IS REQUIRED TO PERMITSMOKING, IF A SMOKING AREA IS CREATED, IT MUST:

- be situated so that ventilation does not draw smoke into or across non-smoking areas;
- · be no larger than the proportion of patrons normally requesting a smoking area;
- be marked by clearly visible and easily read signs and contain ashtrays;
- be set apart or separated from non-smoking areas;
- not include cashier areas or service lines.

THE WORKPLACE

EVERY EMPLOYER IS REQUIRED TO ADOPT AND CONSPICUOUSLY POST A WRITTEN EMPLOYEE SMOKING POLICY WHICH INCLUDES THE FOLLOWING:

Any employee may object to smoke in the normally frequented work area. The employer shall attempt to accommodate non-smokers and smokers by using available ventilation and separation. If an accommodation cannot be reached, THE PREFERENCE OF THE NON-SMOKER SHALL PREVAIL, except when non-smokers are in designated public smoking areas or in private offices occupied exclusively by smokers.

SIGNS

CLEARLY VISIBLE AND EASILY READ SIGNS MUST BE POSTED AT EACH ENTRANCE TO A PUBLIC PLACE NOTIFYING THE PUBLIC WHETHER (1) SMOKING IS PROHIBITED THROUGHOUT, (2) SMOKING IS PROHIBITED EXCEPT IN DESIGNATED AREAS OR (3) SMOKING IS PERMITTED THROUGHOUT. Lesseing must be no smaller than two inches high.

EXCEPTIONS TO THE ORDINANCE

Tobacco retail shops, separate restaurant bar areas and bars deriving more than 50% of their income from alcohol sales may permit smoking throughout but must bear proper signs. This is also true for an establishment whose management can show that 95% of its patrons normally request a smoking area. Private social functions in enclosed, separated areas of public places are exempt.

OFFENSES

Any person smoking in an enclosed public place not designated as a smoking area is in violation of the ordinance. Further, any person in charge of an enclosed public place also violates the ordinance if he/she fails to make a reasonable attempt to prevent smoking in any area not designated as a smoking area upon becoming aware of such an occurrence.

EACH VIOLATION IN PUNISHABLE BY \$1,000 PENALTY

Upon observing any violation of the ordinance, an individual may:

ASK THE SMOKER to extinguish his/her smoking material; or
ASK THE PERSON IN CHARGE to make a reasonable effort to prevent the smoker from smoking in a non-smoking area;

REQUEST THE AUSTIN POLICE DEPARTMENT to come and identify the smoker, if necessary; and/or FILE A FORMAL COMPLAINT at Municipal Court, 700 East 7th Street. Municipal Court is open 24 hours per day, 7 days a week. The person filling the complaint must be able to identify the violator.

Violanous may also be reported to the Austra-Travis County Health Department (469-2015). The Health Department will first seek voluntary compliance. If compliance does not occur, the Department will file a compliant in Municipal Court, which can result in a fine of \$1000 per offense.

AID IN COMPLIANCE

Sample copies of the ordinance, guidelines, written employment smoking policies and patron polling forms are available from the Austin-Travis County Health Department at 469-2015. The Health Department is available during normal business hours to answer questions concerning all aspects of the ordinance.

FRIENDS OF AUSTIN NONSMOKERS P.O. BOX 180751 AUSTIN, TEXAS 78718

These eards are distributed as a public service by Friends of Austin Nonsmokers (FANS), a local organization working to protect the public from the health extrage caused by exposure to second and tobacco smoke. FANS is the citizens' organization primarily responsible for the passage of the Austin Clean Indoor Air Act.

FANS also publishes a newsletter on smoking and nonsmokers and nonsmokers rights, and sells signs, buttons, stickers, etc., to help nonsmoker gain their rights.

To join, or for further information, write FANS at the address above. For additional free cards, please enclose a large, stamped, self-addressed envelope.

Contributions to FANS are urgently needed. Please contribute if possible.

WHAT YOU CAN DO TO HELP PROTECT NONSMOKERS

- KNOW YOUR RIGHTS as a nonsmoker, and insist on them.
- · FILE formal complaints if you are denied your rights.
- ADVISE others of their rights, and encourage them to file complaints when necessary.
- DISTRIBUTE these cards to other nonsmokers.
- · JOIN and support FANS and other nonsmokers' rights groups.
- · USE signs, buttons, etc., to speak out.
- · HELP ENFORCE existing no-smoking laws wherever they exist.
- WRITE legislators and other officials for more clean air laws.

SAMPLE ORDINANCI

The enclosed sample ordinance is a generic form of the Austin city ordinance. Community organizers have praised this comprehensive ordinance and adapted it to fit community needs both state-wide and outside Texas. It will provide your Committee with a starting point from which to develop your own ordinance. "Nonsmoking Ordinance Principles" is a listing of definitions and terms used in the sample ordinance. The Committee may want to use this as a checklist during discussions leading to development of an objective, or to clarify specifies of the ordinance.

Sample City Smoking Ordinance

WHEREAS, the Surgeon General of the United States has declared that smoking is the number one public health issue of our time; and
WHEREAS, smoking is a detriment to the economic health of a business; and
WHEREAS, the City of recognizes the increasing evidence that smoke creates a danger to the health of some citizens, and is a cause of annoyance and discomfort to those who are in confined spaces where smoke is present; and
WHEREAS, in order to protect the health and welfare of those citizens, as well as to protect the rights of smokers and nonsmokers, it is necessary to restrict smoking in public places except in areas designated as smoking areas; NOW, THEREFORE,
BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF: PART 1.
(a) In this ordinance:
(1) "Employee" means any person who is employed by an employer in consideration for monetary compensation or profit;
(2) "Employer" means any person, parmership, corporation, association or other entity, that employs one or more persons;
(3) "Place of employment" means any enclosed indoor area under the control of an employer to which employees have access during the course of employment, including, but not limited to work areas, employee lounges, employee restrooms, conference rooms, and employee cafeterias; A private residence is not a place of employment;
(4) "Public place" means
 any enclosed indoor area that is used by the general public, or that is a place of employment, and includes, but is not limited to: stores, offices, and other commercial establishments; restaurants; public and private institutions of higher education; health care facilities; nursing and convalescent homes; and government subsidized senior citizen residential facilities; b. any public swimming pool owned or operation by the City, inclusive of the entire area within the

- (5) "Service Line" means any indoor line at which one or more persons are waiting for or receiving service of any kind, whether or not such service involves the exchange of money;
- (6) "Smoke" or "Smoking" includes the carrying or holding of a lighted pipe, cigar or cigarette of any kind, or any other lighted smoking equipment or device, and the lighting of, emitting or exhaling the smoke of a pipe, cigar or cigarette of any kind.
- (b) A person commits an offense if he:
 - knowingly or intentionally smokes in a public place and is not in an area designated as a smoking area under this ordinance;
 - (2) knowingly or intentionally smokes in a taxicab that is not a taxicab in which smoking is permitted; or

- (3) is the owner, lessee or other person in charge of a public place, and knowingly or intentionally permits, or fails to make a reasonable effort to prevent commission, by another, of the offense described in subsection (1) of this section within such public place.
- (e) (1). The owner, lessee or other person in charge of a public place may, but is not required to designate one or more areas as smoking areas.
 - (2) If a smoking area is designated in a public place, each such smoking area shall:
 - a. be not larger in size than proportionate to the preference of the users normally requesting a smoking area, as can be demonstrated by the owner, lessee, or other person in charge;
 - b. be situated so the ventilation minimizes the effect of smoke in adjacent non-smoking areas, and so that air from the smoking areas is not drawn into or across a non-smoking area;
 - c. be designated by appropriate signs which are clearly visible to patrons in or entering the area:
 - d. contain ashtrays, containers, or other facilities for extinguishing of smoking materials; and
 - e. be set apart or separated from non-smoking areas; and
 - f. not include service line or cashier areas.
 - (3) In the event the owner, lessee or person in charge of a public place can demonstrate that the users or patrons normally requesting a smoking area constitute such a large portion of the users of the public place that it is impracticable for the owner, lessee or person in charge to meet the requirements of sections (c)(2) b. and (c)(2)e. without structural or other physical changes or significant expenditures, the owner, lessee or person in charge may designate an area not meeting the requirements of (c) (2) a. (including the entire public place, except for those areas designated in (c) (2) f.) as a smoking area. If the entire area is designated a smoking area, the owner, lessee or person in charge shall place a sign or signs at each entrance to the premises which are clearly visible and state that smoking is permitted throughout the premises.
- (d) Except as provided by the preceding section, the owner, lessee or other person in charge of a public place shall place a sign or signs, visible at each entrance to the premises, notifying persons entering the premises that smoking is prohibited, or that smoking, other than within designated smoking areas, is prohibited.
- (e) (1) The holder of any franchise to operate a taxicab within the City may, but is not required to designate one or more of the taxicabs in operation pursuant to said franchise, as taxicabs in which smoking is permitted.
 - (2) Each taxicab shall be designated by notices clearly visible to persons entering or in the taxicab as a taxicab in which smoking is permitted or a taxicab in which smoking is not permitted.
- (f) Each employer who operates a place of employment in the city shall, within three (3) months of adoption of this ordinance, adopt, implement and maintain a written smoking policy which shall contain, at a minimum, the following provisions and requirements:
 - (1) Any nonsmoking employee may object to his or her employer about smoke in any portion of his or her place of employment normally frequented by said employee. Using already available means of ventilation, separation or partition, the employer shall attempt to reach a reasonable accommodation, insofar as possible, between the preferences of nonsmoking and smoking employees. An employer is not required by this provision to incur any expense, or make structural or other physical modifications to accommodate the preferences of nonsmoking or smoking employees.
 - (2) If an accommodation which is satisfactory to all affected nonsmoking employees cannot be reached as to any portion of the place of employment about which complaint has been voiced, the preferences of nonsmoking employees shall prevail, to the end that nonsmoking employees may work in a smokefree environment. No such portion of the place of employment shall be designated as a smoking area.

Provided however, the requirements of this subsection (2) shall not apply to nonsmoking employees whose job duties include serving of or routine interaction with members of the general public within designated smoking areas, nor to any private enclosed office workspace occupied exclusively by smokers, even though such office may be visited by nonsmokers.

- (3) The smoking policy shall be announced within three (3) weeks of adoption to all employees working in the place of employment and posted conspicuously in all workplaces under the employer's jurisdiction.
- (g) It is an exception to the application of paragraph (b) (1) of this ordinance that the person smoking tobacco or in possession of the burning tobacco product is in a situation in which the person is present at an event in which an entire room or confined area is used for a private social function and the event is under the control of the sponsor of the function and not of the owner, proprietor or person in charge of the public place. This exception includes, but is not limited to, areas of public places, such as hotels, which are normally rented out to private groups, and to areas of bowling centers used by bowling leagues during league play.
- (h) The following public places are not subject to sections (b) (3) and (c) (2) of this ordinance, but such public places are encouraged, whenever possible, to follow the guidelines established in section (c) (2) of this ordinance:
 - (1) an establishment in which more than 50% of its annual gross sales is from alcoholic beverages sold for on-premises consumption;
 - (2) a separated bar area of a restaurant; and

PART 4. This ordinance shall be effective from and after

- (3) a tobacco specialty retail shop.
- (i) The owner, lessee or other person in charge of any conveyance or place describe in Code ______
 - (1) if he fails to have prominently displayed a reasonably sized notice that smoking is prohibited by state law in such conveyance and/or place; or
 - (2) if he fails to have such conveyance or place equipped with facilities for extinguishing of smoking materials.
- (j) The violation of any provision of this ordinance shall be unlawful and a misdemeanor offense; each day a violation of this ordinance continues shall constitute a separate offense.
- <u>PART 2</u>, Nothing in this ordinance excuses non-compliance with any State or Federal law, City ordinance, or any rule or regulation adopted pursuant thereto, which prohibits smoking.
- PART3. If any provision, section, sentence, clause or phrase of this ordinance, or the application of same to any person or set of circumstances is for any reason held to be unconstitutional, wid or invalid (or for any reason unenforceable), the validity of the remaining portion of this ordinance or its application to other persons or sets of circumstances shall not be affected thereby, it being the intent of the City Council of the City of ______ in adopting, and of the Mayor in approving this ordinance, that no portion hereof or provision or regulation contained herein shall become inoperative or fail by reason of any unconstitutionality or invalidity of any other portion, provision or regulation.

APPROVED:	ATTEST:	
	Mayor	٠
PASSED AND APPROVED		
		- P

Non-Smoking Ordinances Principles

Purpose:

The purpose is to protect the public health, comfort and environment by prohibiting smoking in public places and at public meetings except in designated smoking areas.

Definitions:

Public place means an enclosed indoor area used by the public including but not limited to:

government buildings

restaurants

retail stores except those which primary business is sale of tobacco or tobacco-related products

public primary or secondary school public institution of higher learning

public means of mass transportation and associated terminals

elevator

health care facilities

libraries

COURTFOORIS

jury waiting and deliberation rooms

grocery stores

nurseries

theaters

auditoriums

arenas

recreational facilities

places of employment

places providing personal services

- Government building means any building or portion of a building used for governmental purposes.
- 3. Public meeting means all meetings open to the public unless such meetings are held in a private residence.
- 4. Smoking means possession of a lighted cigarette, cigar or pipe or other tobacco product.
- 5. Smoking area means any designated area for smoking.

Probibition:

No person may smoke in a public place or at a public meeting except in designated smoking areas.

Designation of Smoking Areas:

- 1. Smoking areas may be designated by person in charge of a public place.
- 2. In restaurants seating more than 50 people, customer preference will determine the size of the smoking area.
- 3. Existing barriers and ventilation systems shall be used to minimize smoke in adjacent nonsmoking areas, making sure that air from a smoking area is not drawn into or across a nonsmoking area.



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- 4. No requirement shall be made for structural or physical modifications.
- 5. A smoking area may not be designated in:

elevator school bus public means of transportation restroom

- 6. A place of employment is not required to allow smoking. Employers who wish to permit smoking on premises shall develop and implement a policy regarding smoking and nonsmoking areas.
- 7. Restaurants, bars and bowling centers which elect to be designated as smoking in their entirety shall conspicuously post notices to that effect at all entrances.

Signs:

The person in charge of a public place shall conspicuously post signs (in an area designated as a smoking area) stating that smoking is permitted in such areas and may also post "no smoking" or "no smoking except in designated areas" signs as appropriate.

The following page is a listing of cities and counties that have established ordinances current as of the date indicated. Copies of these ordinances can be obtained by connecing the City Secretary in the respective cities.

The following page is a listing of cities and counties that have established ordinances current as of the date indicated. Copies of these ordinances can be obtained by connexing the City Secretary in the respective cities.

Cities With Local Smoking Ordinances

- 1. Abilene
- 2. Addison
- 3. Arlington
- 4. Austin
- 5. Bedford
- 6. Bryan
- 7. Corpus Christi
- 8. Dallas
- 9. Dcl Rio
- 10. Denton
- 11. Eagle Pass
- 12. El Paso
- 13. Euless
- 14. Fort Worth
- 15. Grand Prairie
- 16. Greenville
- 17. Halton City
- 18. Houston
- 19. Huntsville
- 20. Hurst
- 21. Kenville
- 22. Leon Valley
- 23. Longview
- 24. Lubbock
- 25. McAllen
- 26. North Richland Hills
- 27. Plano
- 28. San Antonio
- 29. Sugarland
- 30. Texaricana
- 31. Tyler
- 32. Wichita Falls

Cities Currently Considering Local Ordinances

- 1. Amarillo
- 2. Belton
- 3. Brownsville
- 4. Grapevine
- 5. Laredo
- 6. Midland/Odessa
- 7. San Angelo
- 8. San Marcos .
- 9. Seguin
- 10. Temple

Ordinances For the Following Counties

- 1. Kerr County
- 2. Taylor County
- 3. Travis County

SECTION IX. FACTS CONCERNING SMOKING

Arguments Against the Ordinance and Possible Responses

- Sources: 1): "The Health Consequences of Involuntary Smoking" a report by the U.S. Surgeon General, and Bureau of National Affairs
 - 2) The BNA Roundtable Discussion
- 1. The ordinance is an invasion of rights.

An ordinance doesn't take away rights, it actually protects the rights of smokers and nonsmokers. If you permit public places and worksites to become filled with cigarette smoke everyone exposed to that environment smokes either voluntarily or passively without choice. An ordinance permits smoking in designated areas yet restricts smoking where it may affect the health of those who choose not to smoke.

2. The dangers of passive smoke are not conclusive.

The Surgeon General has reported that cigarette smoke itself contains cancer-causing chemicals and is a cause of lung cancer in healthy nonsmokers. The children of parents who smoke have an increased frequency of respiratory infections, increased respiratory symptoms and slightly smaller rates of increase in lung function as the lung matures. The amount of uncertainty about the hazards of secondhand smoke is quite small compared with other things that we are quite happy to have government or employers regulate or reduce our exposure to. Why do we need to adopt a different standard for tobacco smoke than we have for benzene, carbon monoxide, asbestos or a number of other things for which we have already taken strong action to reduce or eliminate?

3. Ordinances are expensive to comply with, and impossible to enforce.

The Surgeon General reports that laws restricting smoking in public places have been implemented with few problems and at little cost to state and local government. In addition, it appears that workplace smoking policies improve air quality, are met with good compliance requiring little or no enforcement, and are willingly accepted by both smokers and nonsmokers. This holds true in Texas cities that have passed ordinances

4. The ordinance will hart business.

In the cities that have established ordinances, there has been no evidence to support this claim. Public opinion polls indicate growing support for restricting smoking in a wide range of public places. The majority of smokers respect the rights of nonsmokers, and many welcome restrictions as an opportunity to reduce their smoking.



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Texas Statistics

Prevalence

27% of Texans age 18 and over are eigarette smokers

31% of Texas men smoke

23% of Texas women smoke

67% began between the ages of 11 and 19

Direct health care costs (expenditures for prevention, diagnosis and treatment of smoking-related diseases and medical conditions) = \$1.518,085,731

Indirect mortality costs (the estimated cost of lost income and productivity for individuals who die prematurely from smoking-related illness) = \$1,079,162, 215

Indirect morbidity costs (the estimated cost of lost income and productivity or individuals who are disabled by smoking-related disease or injury) = \$616,978,157.

The total estimated annual smoking-attributable costs are equal to \$1.83 for every pack of cigarettes sold in Texas or \$1036 for every smoker age 18 and over in the state.

In addition, there are an estimated 16,697 smoking-attributable deaths in Texas annually. This represents 14.1% of the total deaths in the state.

Table 1
Texas Smoking-Attributable Deaths by Diagnostic Category 1986

Diagnostic Group	Males	Females	Both Sexes Ages 20-64	Both Sexes Ages 65+
Lung Cancer	3666	830	1849	2647
Other Neoplasms	943	424	550	817
Ischemic Heart Disease	2766	964	1458	2272
Other Cardiovascular	1850	1828	760	2917
Respiratory	2275	978	609	2643
Tuberculosis	31	0	. 13	18
Ulcers	71	72		110
Column Total	11602	5095	5273 .	11424
Grand Total				16697

Office of Security of Health Public Health Processing Division

Term Department of Horizon

FACTS ON CIGARETTE SMOKING

- Smoking is the single largest preventable cause of premature death and disability in the United States.
- Every year 320,000 Americans die prematurely from diseases caused by eigarette smoking, such as lung cancer, emphysema, and coronary heart disease.
- Nicotine addiction is "the most widespread example of drug dependence in our country," according to the U.S. Public Health Service.
- * Three-quarters of the adults who currently smoke started their habit before the age of 21; teenage years are critical ones in the habituation of cigarette smokers.
- * Nine out of ten smokers say they want to quit.
- The number of Americans who have quit smoking is rising steadily. To date, 36 million Americans have quit smoking.
- Smoking accounts for 85-90 percent of emphysema mortality in America. Once a disease that affected
 exclusively men, one in four emphysema deaths now occurs among women.
- Lung cancer, already the number one cause of cancer mortality in American men, surpassed breast cancer as the leading cancer killer of American women in 1986.
- In 1985 lung cancer killed an estimated 38,600 women—approximately 84 percent of the 46,000 women
 who will be diagnosed with the disease this year.
- Smokers who have a heart attack have less chance for survival than a person who does not smoke. And by
 continuing to smoke after a heart attack, the person's chance for a second attack increases.
- Smoking has severe economic consequences for the nation, estimated at a staggering S42 billion in total annual costs. Direct costs account for 38 percent or \$16 billion in lost productivity due to excess morbidity and mortality. Medicaid and Medicare are estimated to spend \$4 billion each year for care of persons suffering from smoking-related illnesses.
- Smoking is a major risk factor for peripheral vascular disease. This disease is a narrowing of blood vessels
 that carry blood to the leg and arm muscles. If a blood clot blocks an already narrowed artery, then the result
 could be the damage or even loss of an arm or leg.

Sources: The American Lung Association, American Heart Association, and American Cancer Society



- Involuntary smoking can cause lung cancer in nonsmokers.
- The children of parents who smoke have an increased frequency of hospitalization for brochitis and pneumonia during the first year of life when compared with the children of nonsmokers.
- The children of parents who smoke have an increased frequency of a variety of acute respiratory illnesses and infections, including chest illnesses before 2 years of age and physician-diagnosed brochitis, tracheitis, and laryngitis, when compared with the children of nonsmokers.
- Chronic cough and phlegm are more frequent in children whose parents smoke compared with children of nonsmokers.
- Undiluted sidestream smoke is characterized by significantly higher concentrations of many of the toxic and carcinogenic compounds found in mainstream smoke, including ammonia, volatile amines, volatile nitrosamines, certain nicotine decomposition products, and aromatic amines.
- Environmental tobacco smoke can be a substantial contributor to the level of indoor air pollution concentrations of respirable particles, benzene, acrolein, N-nitrosamine, pyrene, and carbon monoxide.
- Measured exposures to respirable suspended particulates are higher for nonsmokers who report exposure to environmental tobacco smoke.
- The main effects of the irritants present in environmental tobacco smoke occur in the conjunctive of the eyes and the mucous membranes of the nose, throat, and lower respiratory tract. These irritant effects are a frequent cause of complaints about poor air quality due to environmental tobacco smoke.
- Smoking policies may have multiple effects. In addition to reducing environmental tobacco smoke exposure, they may alter smoking behavior and public animdes about tobacco use. Over time, this may contribute to a reduction in smoking in the United States. To the present, there has been relatively little systematic evaluation of policies restricting smoking in public places or at the workplace.
- On the basis of case reports and a small number of systematic studies, it appears that workplace smoking policies improve air quality, are met with good compliance, and are well accepted by both smokers and nonsmokers. Policies appear to be followed by a decrease in smokers' cigarette consumption at work and an increase in enrollment in company-sponsored smoking cessation programs.
- Laws restricting smoking in public places have been implemented with few problems and at little cost to State and local government.
- Public opinion polls document strong and growing support for restricting or banning smoking in a wide range of public places. Changes in attitudes about smoking in public appear to have preceded legislation, but the interrelationship of smoking attitudes, behavior, and legislation are complex.

Source: The U.S. Surgeon General's report, "The Health Consequences of Involuntary Smoking"

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SECTION X. ADDITIONAL RESOURCES

Information, materials and technical assistance can be obtained from the Texas Office of Smoking and Health (1-800-345-8647) or your local chapters of the American Lung Association, American Heart Association, and American Cancer Society.

The <u>Directory of Smoking Resources and Contacts in Texas</u> is published annually by the Texas Office of Smoking and Health. This community resource directory lists organizations who provide tobacco information, cessation programs, school materials, and a variety of services across Texas. To obtain a copy call toll-free 1-800-345-8647.

Rebecca Herron of the American Lung Association of Texas (1-512-343-0502) and June Ferris of Texas Office of Smoking and Health can provide additional information and assistance.

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AMERICIM LUMG ASSOCIATION OF TEXIS.

3520 EJECUTIVE CENTER ORIVE, SUITE G-100
AUSTIN, TEXIS. 78731-1626
\$12/343-0502
1-800-252-LUMG